



**City of Hermosa Beach**  
1315 Valley Drive, Hermosa Beach, CA 90254  
310.318-0203 - Fax 310.372-6186  
Email: [recordsrequest@hermosabch.org](mailto:recordsrequest@hermosabch.org)



Received By: CC  
Referred To: PW  
Date Referred: 2-12-18

## Public Records Request

The City of Hermosa Beach encourages public participation in the governing process and provides reasonable accessibility to all public records except those documents which are exempt from disclosure by express provisions of law or considered confidential or privileged under the law. The City is under no obligation to respond to requests which are not focused or specific. The City may withhold documents which are exempt from disclosure under state or federal law, including the attorney—client privilege or any other applicable privilege. The City, in accordance with Government Code Section 6253(b), has ten (10) days to respond to any request for public documents by indicating whether or not the documents exist and will be made available. Actual production of the documents may take somewhat longer depending upon their ease of availability and staff workload. To assist us in providing a timely response to your request, please fill out the form below and indicate the specific record/document you wish to review.

Name (please print): <u>Marisol B. Hernandez</u>	Email: <u>marisolb@socalccc.org</u>
Address:	Phone: <u>626-441-8355</u>
City:	Fax:

### Record or Document Requested:

To assist the City with your request, please identify each requested record/document separately. Please be as specific as possible. Non specific inquiries may cause responses to be delayed or may prove to be burdensome and therefore the City may not be able to respond. (Additional sheets may be used) **Submit all requests to the City Clerk's Office.**

See attached

Photocopies are \$0.20 per page (Mailing fee, if applicable is \$3.00 plus postage). Fees must be paid before records are released.

I agree to pay all applicable fees and charges per the City Council Resolution of Fees for any copies I request of the above mentioned document. *Accepted method of payment:* Cash or check. Credit card accepted in person only.

Signature

Date

### For Departmental Use Only:

Action Requested:	Action Taken:	By	Date
<u>Review Only</u>	<u>Document Reviewed</u>	<u></u>	<u></u>
<u>Copies Requested</u>	<u>Copies Provided</u>	<u></u>	<u></u>
	<u>Refusal/Reason</u>	<u></u>	<u></u>

### For City Clerk's Use Only:

Date Requestor Notified  Notified By:  Date Picked Up or Mailed



# CENTER FOR CONTRACT COMPLIANCE

Los Angeles County Office

4399 North Santa Anita Ave. #100 · El Monte, CA 91731

TEL (626) 444-8355 · FAX (626) 444-8173

**\*\*Please reference ID number 17-762337 in response to this query, include general contractor/sub-contractor and MUST PROVIDE LICENSE NUMBERS. Thank you.**

*Date: February 12, 2018*

*Number of pages: (1)*

To:

City of Hermosa Beach  
1315 Valley Dr  
Hermosa Beach CA 90254

*Phone: (310) 318-0239*

From:

Marisol B. Hernandez  
4399 Santa Anita Ave.  
Suite 100  
El Monte, CA 91731  
[marisolb@socalccc.org](mailto:marisolb@socalccc.org)

*Phone: (626) 444-8355*

*Fax: (626) 444-8173*

## COMMENTS:

### SECOND REQUEST

This FAX is a formal request for a copy of the General Contractor, Sub-Contractors List, Multiple Prime Contractor's if any, Start & Completion Date, Bid Advertisement Date and Award Date for the following referenced project.

**PROJECT: New Retaining Wall and Prefab Building Foundation 17683**

\* We are requesting the documents pursuant to the California Public Records Act, Government Code Section 6250, et. Seq. Public Contract Code Section 4104, et. Seq., requires that the general contractor list the name, location of each awarded subcontractor, and license number of each awarded subcontractor, at the time of bid submission. Under the statute, if the general contractor does not list the subcontractors, then the general contractor is required to perform the work with their own employees.

Please fax the requested information directly to our office @ (626) 444-8173 or e-mail [marisolb@socalccc.org](mailto:marisolb@socalccc.org)

Should you have any questions, please do not hesitate to contact me @ (626) 444-8355 I look forward to your prompt response. Thank you for your time and courtesy!